

Division of Disability and Rehabilitative Services
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CIH Cost Analysis Subcommittee Meeting Minutes

Date/Time: January 12, 2016 10:00am- 12:00pm

Place: Insights Consulting

7830 Johnson Road Indianapolis, IN 46250

Attendees:

Adam Schwelnus
Laura Fife
Dan Stewart
Nicole Norvell
Thom Hayes
Misty Woltman- by phone
Nathan Grossman
Jennifer McBlane – not in attendance

Introductions – Who are you, your affiliation, and what you can offer to this subcommittee?

Topics

Advisory Subcommittee Objective

- Goal is to utilize this subcommittee to parallel the rate development with no preconceived notions.
- Information and minutes from the meeting will be posted on the DDRS website, as well as being 100% accessible by the public.
- The committee will have the opportunity to look at all services that are provided in an individual's home/residence.
- DDRS is looking for input from stakeholders to provide the information on cost analysis.

Community Integration & Habilitation Waiver (CIH)

One of the purposes of subcommittee will be to discuss any of the services housed under CIH

 recommendations, concerns, etc.



> CIH Service Definition Changes

- There are name changes to the services, but more importantly there are definitions changes and new requirements within those definitions.
- The new service definitions in the CIH amendment are currently being reviewed by CMS and DDRS is awaiting their feedback. Updates on the amendment process will be provided over the course of this subcommittee.
- Everyone is encouraged to read the service definitions there are some additional requirements as part of the Enhanced Residential Living service – there are training requirements that were not included previously – there will not be much change that the client would see in their day to day - but providers will need to be aware of changes in some of the components.
- An Intensive Residential Support Behavioral or Medical provider will be specialized in their services – they will have demonstrated an expertise in their areas. It will be up to the individual's support team to determine which focus will best meet the individual's needs. Both services have the component of a nurse, both supports have behavioral & medical based clinicians on the Clinical Review Team – there would not be a loss for the individual if they have both needs – their support team will need to decide what is more relevant for them at that time.
- The Clinical Review Team will be contractors of the State and will act on behalf of the State.
 The Individual Support Team will need to determine the needs of the individual and submit to the Clinical Review Team.
- Intensive Residential Support Behavioral or Medical will be more specialized for individuals with the hope that they will transition into more appropriate settings.

Recommendations

- This committee could be utilized by DDRS in helping respond to any feedback regarding the CIH Amendment and CIH cost analysis.
- ➤ Call for the subcommittee to really think about the service population who are 25 or 30 years of age and will be utilizing these services for the next 30 or 40 years. This subcommittee can really drive the service delivery of the future.
- Natural supports strategy could be a tenant of this subcommittee where we think outside of the box in how these supports can be utilized.
- Working backwards: Starting idea to have the subcommittee give their opinions and then work from there.
- Concrete timeline should be suggested as an informational item to the public.
- This subcommittee does not have a hard deadline for completion of its work, because there is nothing in this waiver amendment that dictates today we change our funding methodologies

- > Additional information or topics for the sub-committee:
 - What are other states doing and how do we look at what is best for Indiana? What relationships/resources do we have outside of Indiana – this may be an opportunity to bring that information to this group to share.
 - States to review: Pennsylvania, Colorado
 - Family Subsidies and what states are doing this
 - Reviewing the National Core Indicators (NCI) Data.

Risk or Concerns

- ➤ Data that the State of Indiana and the providers have will be different in some regards.
 - This is where the recommendations from the subcommittee will come into play as being very important.
 - There will be different data points the subcommittee has that the state won't and that needs to be communicated through the committee.

Planning Ahead

> February

- Review relevant federal rules, regulation & guidance (CMS, OMB, etc.)
- Review of Reimbursement Model and Cost Analysis used by comparable programs (IN and other states).

> March

- Discuss major cost components of CIH residential services & trends.
- Direct service staff (supervision, QA & training, administration overhead, etc.)

> April

Discuss components of a cost study (cost survey structure, participation, frequency, validation, etc.).

May & June

Discuss DDRS' proposed cost analysis approach.

Tasks

> State Research

- PCG to look at Pennsylvania's shared living program, the family subsidy programs in Illinois and programs in North Carolina and Colorado
- Goal of looking at other states who have implemented innovative programs and what the cost structure of those looks like.
- Kim Opsahl will share a presentation from the University of Colorado (Coleman Center) on some innovative work.
- Dick Rhoad will share some relevant data at the next meeting with regard to some wage experiments within current funding methods.

Public Access Issues

• DDRS to ensure the committee's compliance with public access and open door laws.

> Subcommittee Meeting Format Changes

- Increase the meeting time from 10AM-12PM to 10AM-2PM
- Move the March 8, 2016 meeting to March 7, 2016

Meeting Schedule

Date	Time	Place
February 9, 2016	10:00AM – 2:00PM	Insights Consulting
March 7, 2016	10:00AM – 2:00PM	Insights Consulting
April 12, 2016	10:00AM – 2:00PM	Insights Consulting
May 10, 2016	10:00AM – 2:00PM	Insights Consulting
June 14, 2016	10:00AM – 2:00PM	Insights Consulting